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|---|---|-----------------------------------|---|--|------------------------------------|
| SERIAL NUMBER 10/687,525 | FILING or 371(c) DATE 10/15/2003 RULE | CLASS 382 | GROUP ART UNIT 2609 | ATTORNEY DOCKET NO. MCIN121603 | |
| APPLICANTS David J. McIntyre, Issaquah, WA; ** CONTINUING DATA ***** This appln claims benefit of 60/418,576 10/15/2002 <i>YES: A.W.</i> ** FOREIGN APPLICATIONS ***** ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** <i>None, A.W.</i> ** SMALL ENTITY ** 01/17/2004 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /AKLILU K WOLDEMARIAM/ Acknowledged Examiner's Signature | <input type="checkbox"/> Met after Allowance Initials | STATE OR COUNTRY WA | SHEETS DRAWINGS 9 | TOTAL CLAIMS 28 | INDEPENDENT CLAIMS 3 |
| ADDRESS CHRISTENSEN, O'CONNOR, JOHNSON, KINDNESS, PLLC 1420 FIFTH AVENUE SUITE 2800 SEATTLE, WA 98101-2347 UNITED STATES | | | | | |
| TITLE System and method for simulating visual defects | | | | | |
| FILING FEE RECEIVED 522 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |